

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>E.H.</i>	<i>52</i>	<i>05-14-01</i>
O.I.P.E. CLASSIFIER	<i>H.L.</i>	<i>1079</i>	<i>07/23/01</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	6/11/01	
2	✓		
3	✓		
4	✓		
5	✓		
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45	✓		
46	✓		
47	✓		
48	✓		
49	✓		
50	✓		

Claim	Final	Original	Date
51	✓	6/11/01	
52	✓		
53	✓		
54	✓		
55	✓		
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57	✓		
58	✓		
59	✓		
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100	✓		

Claim	Final	Original	Date
101	✓	6/11/01	
102	✓		
103	✓		
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148	✓		
149	✓		
150	✓		

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If more than 150 claims or 10 actions  
staple additional sheet here

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